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PTO/SB/50 (08-00)

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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## REISSUE PATENT APPLICATION TRANSMITTAL

Address to:

Assistant Commissioner for Patents  
Box Reissue  
Washington, DC 20231

Attorney Docket No.	155634-0012
First Named Inventor	Me Van Le
Original Patent Number	5,867,343
Original Patent Issue Date (Month/Day/Year)	February 2, 1999
Express Mail Label No.	EL692571161US

### APPLICATION FOR REISSUE OF:

(Check applicable box)



Utility Patent



Design Patent



Plant Patent

### APPLICATION ELEMENTS (37 CFR 1.173)

- ☒ Fee Transmittal Form (PTO/SB/ 56)  
(Submit an original, and a duplicate for fee processing)
- ☐ Applicant claims small entity status. See 37 CFR 1.27.
- ☒ Specification and Claims in double column copy of patent format (amended, if appropriate)
- ☒ Drawing(s) (proposed amendments, if appropriate)
- ☒ Reissue Oath/Declaration (original or copy)  
(37 C.F.R. § 1.175) (PTO/SB/51 or 52)
- Original U.S. Patent currently assigned?  
☒ Yes ☐ No  
(If Yes, check applicable box(es))  
☒ Written Consent of all Assignees (PTO/SB/53)  
☐ 37 C.F.R. § 3.73(b) Statement ☐ Power of Attorney (PTO/SB/96)

### ACCOMPANYING APPLICATION PARTS

- ☐ Statement of status/support for all changes to the claims. See 37 CFR 1.173 (c).
- ☐ Original U.S. Patent for surrender  
☐ Ribboned Original Patent Grant  
☐ Statement of Loss (PTO/SB/55)
- ☐ Foreign Priority Claim (35 U.S.C. 119) (if applicable)
- ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
- ☐ English Translation of Reissue Oath/Declaration (if applicable)
- ☐ Preliminary Amendment
- ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
- Other: .....

### 15. CORRESPONDENCE ADDRESS



Customer Number or Bar Code Label

or ☒ Correspondence address below

(Insert Customer No. or Attach bar code label here)

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33,609

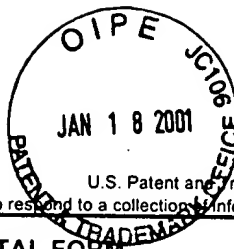
Signature

*Ben J. Yorks*

Date

January 16, 2001

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PTO/SB/56 (08-00)

Approved for use through 12/30/2000. OMB 0651-0033  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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REISSUE APPLICATION FEE TRANSMITTAL FORM						Docket Number (Optional) 155634-0012		
Claims as Filed - Part 1								
Claims in Patent		Number Filed in Reissue Application	(3) Number Extra	Small Entity Rate Fee		Other than a Small Entity Rate Fee		
(A) 12 (C) 3	Total Claims (37 CFR 1.16(j)) Independent claims (37 CFR 1.16(i))	(B) 34 (D) 9	**** 14 = * 6 =	x \$ _____ = x \$ _____ =		or x \$ 18 = x \$ 80 =	252.00 480.00	
Basic Fee (37 CFR 1.16(h))					\$ 710	\$ 710		
Total Filing Fee					\$	OR	\$ 1442.00	
Claims as Amended - Part 2								
	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity Rate Fee		Other than a Small Entity Rate Fee	
Total Claims (37 CFR 1.16(j))	***	MINUS	**	* =	x \$ 18 =		x \$ _____ =	
Independent Claims (37 CFR 1.16(i))	***	MINUS	*****	=	x \$ 80 =		x \$ _____ =	
Total Additional Fee					\$	OR	\$	
<p>* If the entry in (D) is less than the entry in (C), Write "0" in column 3.</p> <p>** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.</p> <p>*** After any cancellation of claims.</p> <p>**** If "A" is greater than 20, use (B - A); if "A" is 20 or less, use (B - 20).</p> <p>***** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. 09-0946. A duplicate copy of this sheet is enclosed.</p> <p><input checked="" type="checkbox"/> A check in the amount of \$ 1,442.00 to cover the filing / additional fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p>								
1/10/01 Date				Ben Yorks Signature of Applicant, Attorney or Agent of Record				
				Ben J. Yorks, Reg. No. 33,609 Typed or printed name				

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**BEFORE THE UNITED STATES PATENT AND TRADEMARK OFFICE**



Application for Reissue of:

Me Van Le et al.

U.S. Patent No. 5,867,343

Method And Apparatus For Storing Position Offset Information On A Hard Drive Assembly  
Cylinder

JUN 01 1998

PTO/SB/17 (10/97)

Approved through 09/30/00. OMB 0651-0032

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**FEE TRANSMITTAL**Note: Effective October 1, 1997.  
Patent fees are subject to annual revision.

Complete if Known

**TOTAL AMOUNT OF PAYMENT** (\$) 110.00

Application Number	08/713,872
Filing Date	September 13, 1996
First Named Inventor	Me Van Le
Group Art Unit	2753
Examiner Name	Thang V. Tran
Attorney Docket Number	002410.P006X

**METHOD OF PAYMENT** (check one)

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 02-2666

Deposit Account Name Blakely, Sokoloff, Taylor & Zafman LLP

- ☒
- Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
- ☐
- Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance, 37 CFR 1.311(b)

- 2.
- ☒
- Payment Enclosed:
- 
- ☒
- Check
- ☐
- Money Order
- ☐
- Other

**FEE CALCULATION** (fees effective 10/01/96)**1. FILING FEE**

Large	Entity	Small	Entity	Fee	Fee	Fee	Fee	Fee Description	Fee Paid
Code	(\$)	Code	(\$)						
101	790	201	395	Utility filing fee					
106	330	206	165	Design filing fee					
107	540	207	270	Plant filing fee					
108	790	208	395	Reissue filing fee					
114	150	214	75	Provisional filing fee					

**SUBTOTAL (1)** (\$)           **2. CLAIMS**

Total Claims	Extra	Fee from below	Fee Paid
16	X		
3	X		

Multiple Dependent Claims

Large	Entity	Small	Entity	Fee	Fee	Fee	Fee	Fee Description
Code	(\$)	Code	(\$)					
103	22	203	11	Claims in excess of 20				
102	82	202	41	Independent claims in excess of 3				
104	270	204	135	Multiple Dependent claim				
109	82	209	41	Reissue independent claims over original patent				
110	22	210	11	Reissue claims in excess of 20 and over original patent				

**SUBTOTAL (2)** (\$)           **FEE CALCULATION** (continued)**3. ADDITIONAL FEE**

Large	Entity	Small	Entity	Fee	Fee	Fee	Fee	Fee Description	Fee Paid
Code	(\$)	Code	(\$)						
105	130	205	65	Surcharge - late filing fee or oath					
127	50	227	25	Surcharge - late provisional filing fee or cover sheet					
139	130	139	130	Non-English specification					
147	2,520	147	2,520	For filing a request for reexamination					
112	920	112	920	Requesting publication of SIR prior to Examiner action					
113	1,840	113	1,840	Requesting publication of SIR after Examiner action					
115	110	215	55	Extension for response within first month					110.00
116	400	216	200	Extension for response within second month					
117	950	217	475	Extension for response within third month					
118	1,510	218	755	Extension for response within fourth month					
119	310	219	155	Notice of Appeal					
120	310	220	155	Filing a brief in support of an appeal					
121	270	221	135	Request for oral hearing					
138	1,510	138	1,510	Petition to institute a public use proceeding					
140	110	240	55	Petition to revive unavoidably abandoned application					
141	1,320	241	660	Petition to revive unintentionally abandoned application					
142	1,320	242	660	Utility issue fee (or reissue)					
143	450	243	225	Design issue fee					
144	670	244	335	Plant issue fee					
122	130	122	130	Petitions to the Commissioner					
123	50	123	50	Petitions related to provisional applications					
126	240	126	240	Submission of Information Disclosure Stmt					
581	40	581	40	Recording each patent assignment per property (times number of properties)					
146	790	246	395	Filing a submission after final rejection (37 CFR 1.129(a))					
149	790	249	395	For each additional invention to be examined (37 CFR 1.129(b))					

Other fee (specify)           Other fee (specify)           **SUBTOTAL (3)** (\$) 110.00

\* Reduced by Basic Filing Fee Paid

**SUBMITTED BY**Typed or Printed Name Kimberley G. NoblesSignature Kimberley G. Nobles

Date

05/26/98**Complete (if applicable)**Reg. Number 38,255Deposit Account User ID 02-2666

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